

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|------------|--------|----------|
| FEES DETERMINATION | <i>Mug</i> | 43 | 9/29/00 |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | RT | 515 | 10-17-00 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|------|
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| 18 | | N | |
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| 20 | | | |
| 21 | | N | |
| 22 | | | |
| 23 | ✓ | ✓ | |
| 24 | - | ✓ | |
| 25 | ✓ | ✓ | |
| 26 | ✓ | ✓ | |
| 27 | ✓ | ✓ | |
| 28 | ✓ | ✓ | |
| 29 | ✓ | ✓ | |
| 30 | ✓ | ✓ | |
| 31 | ✓ | ✓ | |
| 32 | ✓ | ✓ | |
| 33 | ✓ | ✓ | |
| 34 | ✓ | ✓ | |
| 35 | ✓ | ✓ | |
| 36 | ✓ | ✓ | |
| 37 | ✓ | ✓ | |
| 38 | ✓ | ✓ | |
| 39 | ✓ | N | |
| 40 | ✓ | N | |
| 41 | ÷ | ✓ | |
| 42 | ✓ | ✓ | |
| 43 | ✓ | ✓ | |
| 44 | ✓ | ✓ | |
| 45 | ✓ | ✓ | |
| 46 | ✓ | ✓ | |
| 47 | ✓ | ✓ | |
| 48 | ✓ | ✓ | |
| 49 | ✓ | ✓ | |
| 50 | ÷ | — | |

| Claim | Final | Original | Date |
|-------|-------|----------|---------|
| 51 | ✓ | ✓ | 9/19/00 |
| 52 | ✓ | ✓ | 9/19/00 |
| 53 | ✓ | ✓ | 9/19/00 |
| 54 | ✓ | ✓ | 9/19/00 |
| 55 | ✓ | ✓ | 9/19/00 |
| 56 | N | ✓ | 9/19/00 |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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